

**STATE OF ALASKA**  
**PAID SOLICITOR ANNUAL REGISTRATION STATEMENT**

This form must be filed on or before September 1<sup>st</sup> and must be  
accompanied with a \$200 registration fee

For forms and other related information,  
please visit our website at  
[www.law.state.ak.us/consumer/](http://www.law.state.ak.us/consumer/)

**Return to:** Alaska Department of Law  
Attorney General's Office  
1031 W. 4th Ave., Suite 200  
Anchorage, AK 99501-1994

Alaska law requires all paid solicitors to file this Paid Solicitor Registration Statement with the Alaska Attorney General, along with a bond in the amount of \$10,000 on a form approved by the Attorney General.

1. Name\_\_\_\_\_
2. Mailing address\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
3. Street address (if different)\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
4. Daytime phone (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_
5. Website address \_\_\_\_\_
6. E-mail address \_\_\_\_\_
7. Is the paid solicitor a corporation? [ ☐ ] Yes [ ☐ ] No  
Year incorporated\_\_\_\_\_  
State of incorporation\_\_\_\_\_
8. LIST OWNERS/PRINCIPAL OFFICERS OF THE PAID SOLICITOR  
Name \_\_\_\_\_ Phone \_\_\_\_\_  
Address \_\_\_\_\_ Title \_\_\_\_\_  
  
Name \_\_\_\_\_ Phone \_\_\_\_\_  
Address \_\_\_\_\_ Title \_\_\_\_\_  
  
Name \_\_\_\_\_ Phone \_\_\_\_\_  
Address \_\_\_\_\_ Title \_\_\_\_\_

NAME THE INDIVIDUAL RESPONSIBLE FOR THE ACTIVITIES OF THE PAID SOLICITOR IN ALASKA:

Name \_\_\_\_\_  
Mailing address \_\_\_\_\_  
Street address \_\_\_\_\_  
City, State, Zip \_\_\_\_\_  
Daytime phone (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

9. NAMES OF THREE OFFICERS OR EMPLOYEES RECEIVING THE GREATEST COMPENSATION FROM THE ORGANIZATION:

1. Name _____	Title _____
2. Name _____	Title _____
3. Name _____	Title _____

10. IN WHAT STATES HAS THE PAID SOLICITOR PERFORMED SERVICES:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

11. CONTRACTS

☐ Attached is a copy of the fundraising service contract, including the scripts used for fundraising, as required by AS 45.68.020 for each charity on whose behalf the paid solicitor will raise funds. Copies of all such documents are attached to this form.

By signing, the paid solicitor: (a) certifies, under penalty of unsworn falsification in violation of AS 11.56.210, that the information contained in this Paid Solicitor for Charitable Organization Annual Registration Statement is true and correct to the best of the paid solicitor's knowledge; (b) appoints the Attorney General of Alaska to receive all process filed against the applicant under the conditions set forth in AS 45.60.080; and, (c) certifies that neither the organization applying for registration nor any of its officers, directors and principals have been convicted of a crime involving charitable solicitation, nor been subject to permanent injunction or administrative order under AS 45.50.471 (Alaska Unfair Trade Practices and Consumer Protection Act).

Date \_\_\_\_\_

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Print or type name)

\_\_\_\_\_  
(Print or type title)